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## 19WA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-3701 www.iowa.gov/ethics



lowa Compaction 8.7 requires all gifts, bequests, and grants given to any department of the state of the or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Discourse Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be

FORM-G	BĠ
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Giff, Bequest, or Grant Information
received by a department or
accepted by the Governor on behalf

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DEPARTMENT OR OFFICE	E DECENTING THE CIE	T DECLIEST OD COANT
DEPARTMENT OR OFFIC	E RECEIVING THE GIF	I. BEQUESI. OR GRANI

iled within 20 days of receipt of the gift, bequest, or grant.	Computer
DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST,	OR GRANT:
State Training School	
Name of Department or Office	
3211 Edgingión Ave.	No. Old - 71- Onde
Malling Address C	ilty, State, Zip Code
Area Code & Telephone No.	
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFI	CE:
Sue Ricks	
Name	FILE 11 CA/AR
J211 Edgington Ave.  Mailing Address (if different from above)	Eldom, IA, 50627  City, State, Zip (If different from above)
ricks@db.stale.ia.us	
Email Address	Area Code & Telephone Number (If different from above)
DONOR OF GIFT, BEQUEST, OR GRANT:	
Wolf Creek Products	
Name	
1425 Washington Street Eldora, IA 50627	11
Mailing Address City, State, Zip Code	5-18-10 \$ 176.00
641-858-2332	Date of Gift, Bequest, or Grant Amount/Value*
Area Code & Telephone Number	"value is defined as "fair market value" of item as determined by
	receiving department or office. If no value mark "0.00".
Email Address (optional)	
Provide a description of the gift, bequest, or grant and purpose thereof:	
Donation was seed potatoes and onion plants for the	students to plant.
Criteria to use this form:	
Receipt of any gift, bequest, or grant that is received by any department	of the clair or received by the Covernor on hehalf of the state
Lesceibt of any authorized to Alexis treat is received by may are harmonical	to the dials of received by the obtainer of below of the state.
Statement of Affirmation:	
Sue Rieksaffirm that the gift, bequest, or grant report	ed above is accurate. I further affirm that the information concerning the
donor and assessment of the fair market value (If applicable) is correct and	l true to the best of my knowledge.
O(0.1)	5 20 10
Lie Birks	5-20-10
Signature	Date